## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                          |                               |   |                  |    | SMALL ENTITY TYPE   |                        |    | OTHER THAN<br>OR SMALL ENTITY |                        |
|---|--|---|--------------------------|-------------------------------|---|------------------|----|---------------------|------------------------|----|-------------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 45                       |                               |   |                  | Γ  | RATE                | FEE                    |    | RATE                          | FEE                    |
| FOR NUMBER FIL  |  |   |                          | ILED                          | NUMBE                                     | ER EXTRA         | E  | BASIC FEE           | 355.00                 | OR | BASIC FEE                     | 710.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 45 minus 20=             |                               | · 2<                                      |                  |    | X\$ 9=              |                        | OR | X\$18=                        | 450                    |
| INDEPENDENT CLAIMS  |  |   | ) minus 3 =              |                               | · Ø                                       |                  | Ī  | X40=                |                        | OR | X80=                          |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                          |                               |   |                  | Ī  | +135=               |                        | OR | +270=                         |                        |
| * If the difference in column 1 is less than zero, enter                              |  |   |                          |                               | r "0" in c                                | olumn 2          | L  | TOTAL               |                        | OR | TOTAL                         | 1160                   |
| CLAIMS AS AMENDED - PART II   |  |   |                          |                               |   |                  |    | •                   |                        | •  | OTHER                         | THAN                   |
| _   | The state of the s | (Column 1)                                  | Bistoria Albando de 1880 | (Column 2) (Column 3) HIGHEST |   |                  |    | SMALLE              |                        | OR | SMALL                         |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                          | NUM<br>PREVI                  | BER<br>OUSLY<br>FOR                       | PRESENT<br>EXTRA |    | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                    | **                            |   | = .              |    | X\$ 9=              |                        | OR | X\$18=                        |                        |
|   | Independent  | *   | Minus                    | ***                           | T OL AIM                                  | =                | ſ  | X40=                |                        | OR | X80=                          |                        |
| L   | FIRST PRESE  | NTATION OF M                                | ULTIPLE DEP              | ENDEN                         | I CLAIM                                   |                  |    | +135=               |                        | OR | +270=                         |                        |
|   |  |   |                          |                               |   |                  | L  | TOTAL               |                        | OR | TOTAL<br>ADDIT. FEE           |                        |
|   |  | ,   | ADDIT. FEE               |                               | •   | ADDII. I EE      |    |                     |                        |    |                               |                        |
| AMENDMENT B   |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                          | HIGI<br>NUN<br>PREVI          | IMN 2)<br>HEST<br>MBER<br>IOUSLY<br>FOR   | PRESENT EXTRA    |    | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                    | **                            |   | =                |    | X\$ 9=              |                        | OR | X\$18=                        |                        |
|   | Independent  | *   | Minus                    | ***                           |   | = .              | Ī  | X40=                |                        | OR | X80=                          |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                          |                               |   |                  |    | +135=               |                        | OR | +270=                         |                        |
|   |  |   |                          |                               |   |                  | L  | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL                         |                        |
|   | (Column 1) (Column 2) (Column 3)   |   |                          |                               |   |                  |    |                     |                        |    | ADDIT. FEE                    |                        |
| ENTC  |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                          | HIG<br>NUN<br>PREV            | IMN 2)<br>HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT EXTRA    |    | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                          | ADDI-<br>TIONAL<br>FEE |
| NG<br>Q   | Total  | *   | Minus                    | **                            |   | =                |    | X\$ 9=              |                        | OR | X\$18=                        |                        |
| AMENDMENT   | Independent  | *   | Minus                    | ***                           |   | =                |    | X40=                |                        | OR | X80=                          |                        |
| الـُ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT   |   |                          |                               |   |                  | ╵┟ | +135=               |                        | l  | +270=                         |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                          |                               |   |                  |    |                     |                        | OR | TOTAL                         |                        |
| **  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  |   |                          |                               |   |                  |    |                     |                        |    |                               |                        |